

rogatory to professional character for physicians to hold patents for any surgical instruments or medicines." The German Ehrlich profited by his salvarsan patent. The American Robertson demonstrated again the prevailing spirit of service and social efficiency which characterize American medicine and science.

#### PERIODIC PHYSICAL EXAMINATION.

It is such an old story. Every doctor knows it. Most patients know it. But the trouble is that he and they are too busy to remember it. Both are prone to let well enough answer. No man can get himself in sufficient perspective to see his own beginning physical and mental infirmities. Few can do it for their moral shortcomings. Even the doctor himself does not always elicit the significant history of a little undue weariness, or slight breathlessness, or hazy vision, or inability to make physical and mental adjustments in reflex fashion. All the numerous little danger signals which a careful history will bring to light are of course really more important than leading symptoms and syndromes at a later stage. And the whole question consists first in getting the man in apparent health to recognize this modern form of life insurance, and in the second place to get the physician to deliver *his* side of the obligation and discover the danger signals when they are present.

How many closeted skeletons of the doctor's memory rise at the suggestion of the case whose nervous eccentricities did not lead to a Wassermann reaction, and who a few years later was a paretic? How many cardiacs and nephritics are such because the doctor did not recognize the early stages, or in any case, did not warn the victim of his peril and the way of escape? It is evident that there are two sides to the question of periodic medical examinations. And the doctor's side is equally important, if not so slighted, as the patient's side.

Consider it as life insurance, consider it as business insurance, consider it from the standpoint of statistics of the high percentage of unsuspected defects and disease uncovered in every group examination,—consider it as the personal point of attack of the modern science of preventive medicine,—and in each case the argument is lucid, and to most of us, self-evident.

Every physician should preach and practice periodic medical examination, at least once yearly when in apparent health. It is reasonable, and represents the best development of the physician's art, the prevention of disease in the individual.

#### THE CONSERVATION OF VITAMINS.

With the present concern over food supply, comes the pitfall for both institutions and individuals of a dietary deficient in vitamins. We do not know what vitamins are. The name is doubtless a misnomer. Accessory food substances necessary for growth and maintenance of healthy nutrition would better describe them. Yet the name has achieved an accepted position in popular and scientific nomenclature, and serves a useful function. We at least know that certain diseases can

be prevented and cured by relieving a dietary fault of which the specific nature is unknown, although what we are pleased to call vitamins are lacking.

Editorial attention was called recently to oleomargarine as a nutritive and economic substitute for butter. In the question of adequate vitamin supply we are likewise concerned not alone with maintaining the necessary nutritive equilibrium of the body, but very practically with supplying the required vitamin fraction at a feasible cost. As with the problem of adequate fat supply, so here that large class of the population is affected whose dietary is modified by increasing food costs. While it is not likely that epidemic scurvy, beriberi or pellagra will follow war food conditions, it is most probable that forms of malnutrition will be in evidence which are important in themselves and which will predispose to other disease and to physical inefficiency.

Dietary rules for the prevention of vitamin deficiency have been well summarized and simplified by Vedder.<sup>1</sup> Bread should be made from whole wheat flour if it is a staple article of diet. Where rice is eaten to a considerable extent it should be the brown under-milled variety. At least once weekly, such legumes as fresh beans or peas should be served. Fresh fruits and vegetables should be eaten several times weekly, barley should be used in all soups, and white potatoes and fresh meat at least once weekly, and preferably once daily. Canned goods should be employed in minimal amounts. If corn meal is used as a staple, it should be the yellow water-ground whole meal.

It is important to remember further that vitamins are inactivated by high temperatures and by certain chemical processes. It was found by Voegtlin Sullivan<sup>2</sup> that coincident with a decreased use of vitamin-rich foods in certain endemic pellagrous areas, there had occurred an increased use of soda in place of yeast to raise bread, and also for addition to vegetables such as beans for instance, to soften them and hasten the process of cookery. It was demonstrated that such alkalization served to inactivate the vitamins of the vegetables and wheat-bread. This is another dietary danger easily avoided.

With reference to costs, it is desired merely to call attention to the excess costs of cereals in cartons. Rolled oats and rolled wheat can be purchased in bulk at lower cost and have a food value greater than many of the cereal preparations in customary use, and both are appetizing.

#### A CLIPPED EDITORIAL.

"The fake medicine business represents profits—fat profits—for many concerns, directly and indirectly. It represents also deception and fraud, swindles, and deliberate, calculated obtaining of money under false pretenses, as the *Tribune* has shown. It exploits sickness and suffering for the sake of gain and leaves the victims in worse case physically and financially than when they began experiments with the 'cures.' There should be no

<sup>1</sup> Jour. A. M. A., 1916, LXVII, 1494.

<sup>2</sup> Pub. Health Rep., Apr. 14, 1916.

tenderness for those who make money in such devious, dangerous ways. Halfway measures should not be considered."—*New York Tribune*.

"Whenever the patent medicine quack is attacked we hear the old familiar cry of 'personal liberty' and persecution. The quack shrieks that there is nothing wrong in his business and that he is being persecuted by the 'Doctor's Trust.'

"When the newspapers of this country finally reach the high plane of keeping faith with their readers and placing editorial ethics above business office receipts, they will not permit a patent medicine advertisement to appear in their columns, and that will mean the death of the patent medicine business."—*The Labor World*.

"The quack doctors named in the *Tribune*, and a host of unnamed others, are a disgrace to the medical profession and a menace to the city. They prey upon a class of people that can least afford to be preyed on. It is from among the hard-working men in the lowest status of our society that they gather their victims. It is the wages that were earned not only in the sweat of the brow but in blood, in the ever-present danger of injury or death through the hazards of the trade, that flows into the coffers of these charlatans. . .

" . . . But they do not content themselves merely with the victims which their lurid posters pick up from among the ignorant fellows in the street. They invade the homes of the miserably poor with advertisements and doctor books printed in all languages, and poison the atmosphere of these homes.

"The State should find a way of stopping the distribution of their filthy circulars. They are as obscure as they are vicious. And the public should see to it that the portion of the press which accepts the advertisements of these quacks ceases to outrage the eye and feeling of the reader."—*The Chicago Daily Tribune*.

Will our readers please send in clippings from all California newspapers along this line. They are worth recording.

#### THE VENEREAL SILENCE.

It is full time that the old superstitious fear of naming syphilis and gonorrhea in public and in private be abolished. How are they to be fought if they must always be unnameable? Why should a current Government publication even speak of "virulent blood poison," when it means syphilis? How many newspapers will use the correct names for these diseases, when they are unashamed at the bold portrayals of the quack advertisers, and patent medicine testimonials, and police court dregs which are spread on a different page? How many public speakers will call them by name when need arises? Why should it be shameful to know their peril and to study their prevention?

The splendid policy and work of the California State Board of Health in protecting the Army camps from venereal disease has been noted and cannot receive too high commendation. The splendid policy and work of the Army and Navy authorities in the same direction deserves the commendation and support of every American. We

have, and surely hope to have in the future, a military force unique in history for its freedom from venereal disease. This objective will not be accomplished, however, by a continuance of the out-grown policy of silence on the subject of these diseases. In civil life let us emulate the worthy example here set before us. Let us call syphilis by its name. Let us go at the stupendous problem of popular education in a sane manner by foregoing this old silence.

#### EDITORIAL COMMENT.

Leather is decreasing and its price is advancing. This sentence has become trite in many applications. And here, as in many of the similar situations, there seems to be a way out. The Journal of the American Veterinary Medical Association for December, 1917, states that pig skins are largely wasted, in spite of the fact that they represent the only substitute on an adequate scale for cow hide. They are superior to cow hide in that they resist surface wear better. Their durability and elegance are attested by a small line of saddles and fancy leather goods now available. Tests have shown them a fully satisfactory material for shoes. There is reported a deficiency of some three million cow hides. The pig skins now wasted on bacon, where they are of neither ornamental nor nutritional value, would doubly replace this shortage. It might be added that the Chinese, who have so much to teach us Westerners, use pig skin for trunks, boxes, and other heavy wear, and it wears like a pig's nose. It is remarkable how many things we are learning to substitute, and to do without as a result of the war. To a great extent this is an economic and social blessing.

In Science for November 30, 1917, Dr. C. E. K. Mees draws an interesting comparison between the process of assimilation in the human economy, and the process of the increase of scientific knowledge in the social economy. There is the production of new knowledge by laboratory research, which corresponds to the preparation and supply of food materials. There is the publication of this knowledge in papers and scientific reports. Finally there is the digestion of this knowledge and its absorption into the general mass of knowledge by the agency of critical comparison. The moral might be added that it is never wise to color facts or force conclusions. The process of digestion of knowledge is essential for its assimilation into the general fund of knowledge, and this process cannot be hurried. The conservatism of the established order is always a good thing, as it aids digestion in this sense and prevents fevers and sudden perversions of social metabolism.

The Principles of Ethics of the American Medical Association states that it is "derogatory to professional character for physicians to accept rebates on prescriptions or surgical appliances." If this is true, then any doctor who receives a rebate from the maker of artificial limbs, trusses, belts, etc., is acting in an unethical and unprofessional manner.